_						D.	<u> 501</u>	ΔV	\mathbf{U}	WH	_(THAT.	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Number 10 3499-1:34													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY TYPE			OTHER THAN		
ΤΟ	TAL CLAIMS		2.1					RATE		FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		7	BASIC F	EE 3	70.00	ЮR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			34 minus 20=		• 14		1	X\$ 9:	.		OR	X\$18=	252
INDEPENDENT CLAIMS			minus 3 =		. 3		7	X42=			OR	X84=	252
ΜU	LTIPLE DEPEN	DENT CLAIM P	RESENT				3	+140=	<u>.</u>		OR	+280=	0.5
• 15	the difference	ero, enter "0" in column 2				TOTAL	+		OR	TOTAL	1524		
CLAIMS AS AMENDED - PART II								1012	<u> </u>		JO: 1	OTHER	
(Column 1) (Column 2) (Column 3)								SMAL	L EN	TITY	OR	SMALL	
MTA		CLAIMS REMAINING AFTER AMENDMENT				PRESENT	r	RATE	: ΤI	DDI- ONAL FEE		RATE	ADDI- TIONAL SEE
AMENDMENT	Total	10		74		- 6		X\$ 9=			OR	X\$18=	ug
Æ	Independent	. 4	Minus	(l	- 0		X42=			OR	X84= U	
₹	FIRST PRESE	NTATION OF MI	MULTIPLE DEPENDENT CLAIM					+140=	1			+280=	
. (TOT			OR	TOTAL	
	•		ADDIT. F			OR	ADDIT. FEE						
 		(Column 1) CLAIMS			mn 2) ∃EST	(Column I	3)		T .	DDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	TI	ONAL FEE		RATE	TIONAL FEE
N S	Total	. 21	Minus	- 6	29_			X\$ 9=	•		OR	X\$18=	1
Ę	Independent	. 2	Minus	***	3	3 -		X42=		T	OR	X84=	/
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=	_	1	OR	+280=	
ł								TOT			OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FI	tt L -		•	AUDII. FEE	· · · · · · · · · · · · · · · · · · ·
	CLAIMS HIGH			HESY		\neg		TA	DDI-	l		ADDI-	
ENT C		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	TI	ONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=	_	X\$ 9=	-		OR	X\$18=	
AMENDA	Independent		Minus	***		-	_	X42=			OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=								丁			+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR	TOTAL	
	If the "Highest Nu	mber Previously P	aid For IN TH	IS SPACE IS SPACE	is less that is less that	an 20, enter an 3. enter *:	3."	ADDIT. F	EE L		OR	ADDIT. FEE	
1	The "Highest Nur	mber Previously Pa	id For" (Total o	or Indepen	dent) is th	e highest nu	mber f	ound in the	appro	priate bo	ox in co	olumn 1.	

FORM PTO-875 (Rev. 8/01)

CHARLES OF CHARLES DEPARTMENT OF COMMERC